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| (Requestor's Name) | | | |
|---|--|--|--|
| | | | |
| (Address) | | | |
| | | | |
| (Address) | | | |
| | | | |
| (City/State/Zip/Phone #) | | | |
| PICK-UP WAIT MAIL | | | |
| | | | |
| (Business Entity Name) | | | |
| | | | |
| (Document Number) | | | |
| | | | |
| Certified Copies Certificates of Status | | | |
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| Special Instructions to Filing Officer: | | | |
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Office Use Only

G. MCLEOD

OCT 22 2008

EXAMINER



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SECRETARY OF STATE
DIVISION OF CORPORATION

COVER LETTER

CR2E079 (5/06)

| TO: Registration Division of C | | | | |
|---|--|---|--|--|
| SUBJECT: MIAI | MIAMI INTERNATIONAL CONSULTING, LLC | | | |
| | (Name of Limited Liability | Company) | | |
| The enclosed member filing. | er, managing member or manager i | resignation and fee(s) are submitted for | | |
| Please return all corr | respondence concerning this matter | r to: | | |
| ROGER GALL | 0 | | | |
| <u> </u> | (Contact Person) | | | |
| CHEROKEE FINANCIAL, LLC | | | | |
| | (Firm/Company) | | | |
| 5145 CURRY I | FORD ROAD SUITE C | | | |
| | (Address) | | | |
| | LORIDA 32812 | | | |
| (1 | City/State and Zip Code) | | | |
| For further informat | ion concerning this matter, please | call: | | |
| ROGER GALL | Oat (40' | 7) 384-4900 | | |
| (Name of C | Contact Person) (Area C | Code & Daytime Telephone Number) | | |
| • — | a check made payable to the Flor 5 Filing Fee | ida Department of State for: \$55 Filing Fee & Certified Copy | | |
| STREET/COURIE Registration Section Division of Corpora Clifton Building 2661 Executive Cen Tallahassee, Florida | tions ter Circle | MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314 | | |



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER FROM FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

| | | it appears on the records of the Florid L CONSULTING ,LLC | da Department |
|--|--|--|-------------------------------------|
| 2. This limited liab | lity company was organized | under the laws of: | |
| 3. The Florida docu LO800006 | <u> </u> | this limited liability company is: | |
| 4. I, ALONSO, | MARIA ISABEL ame of Person Resigning) | , hereby resign as a MANAG (Print | ER MEMBER 🕏 |
| of this limited liab resignation in wri | | e limited liability company has been | notified of my |
| Signature of Resi | gning Member, Managing M | lember or Manager | SECRETARI VISION OF |
| Filing Fee: Certified Copy: | \$25.00 (Required) \$30.00 (Optional) | | FILED NRY DE SIGN F CORE GRAT |